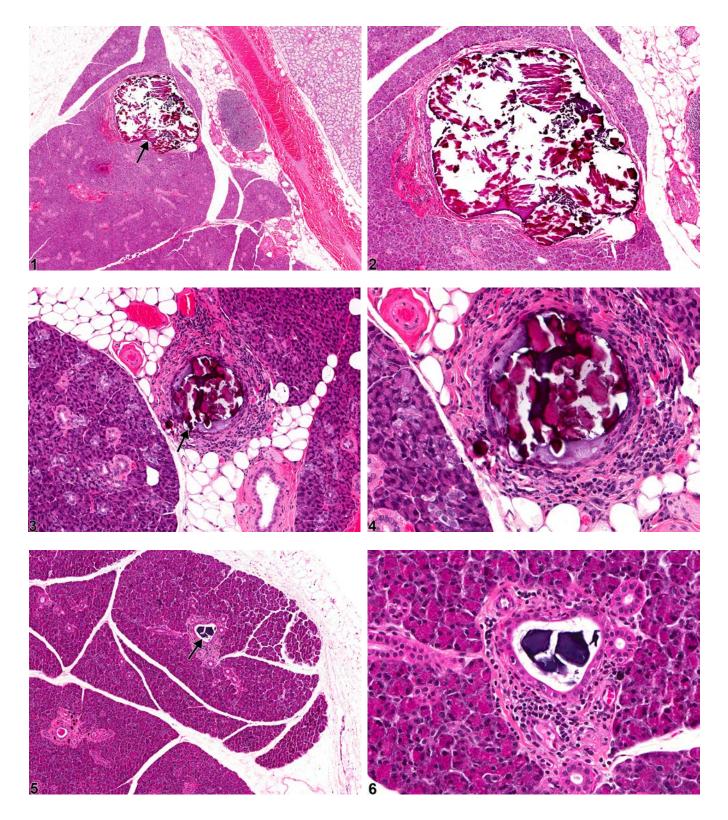


NTP Nonneoplastic Lesion Atlas

Salivary Gland, Duct - Concretion







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Figure Legend: Figure 1 Salivary gland, Duct - Concretion in a female F344/N rat from a subchronic study. The relatively large concretion (arrow) is obstructing and expanding a salivary duct. Figure 2 Salivary gland, Duct - Concretion in a female F344/N rat from a subchronic study (higher magnification of Figure 1). The concretion became fragmented during processing. Figure 3 Salivary gland, Duct - Concretion in a male B6C3F1 mouse from a subchronic study. There is a basophilic concretion (arrow) in a salivary duct. Figure 4 Salivary gland, Duct - Concretion in a male B6C3F1 mouse from a subchronic study (higher magnification of Figure 3). The concretion is eliciting a chronic inflammatory response around the duct with fibrosis. Figure 5 Salivary gland, Duct - Concretion in a female F344/N rat from an acute study. There is a basophilic concretion (arrow) in a salivary duct. Figure 6 Salivary gland, Duct - Concretion in a female F344/N rat from an acute study (higher magnification of Figure 5). The concretion is eliciting a chronic inflammatory response around the duct with fibrosis.

Comment: Concretions (mineralization of material in the ductular lumen) occur infrequently but are most commonly seen in older animals as a background lesion. They may be seen with atrophy. Concretions or foreign bodies can lead to duct dilation, inflammation, and fibrosis.

Recommendation: A concretion in a salivary duct should be diagnosed whenever present. They need not be graded unless grading would divulge a treatment effect. Secondary lesions, such as dilation, inflammation, and fibrosis, need not be diagnosed separately unless warranted by severity.

References:

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